PTO/SB/21 (09-04)

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FORM	

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<u>6</u>

Total Number of Pages in This Submission

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Application Number	10/789,065
Filing Date	February 27, 2004
First Named Inventor	Moses A. Lipshaw
Art Unit	3743
Examiner Name	Doster Greene, Dinnatia Jo
Attorney Docket Number	CAID-1019480 (formerly 110651-022)

ENCLOSURES (Check all that apply)						
Fee Transmittal Form (in duplicate)	Drawing(s)	After Allowance	Communication to TC			
Fee Attached	Licensing-related Papers	of Appeals and				
Amendment/Reply	Petition	Appeal Commu (Appeal Notice, I	inication to TC Brief, Reply Brief)			
After Final	Petition to Convert to a Provisional Application	Proprietary Info	mation			
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter	-(a) (ala asa Islandifi.			
Extension of Time Request	Terminal Disclaimer	below):	e(s) (please Identify			
Express Abandonment Request	Request for Refund		49A/PTO; and			
Information Disclosure Statement	CD, Number of CD(s) Landscape Table on CD	2. Return R	Receipt Postcard			
Certified Copy of Priority Document(s)	Remarks					
Response to Missing Parts/ Incomplete Application						
Response to Missing Parts under 37 CFR 1.52 or 1.53						
SIGNATI	JRE OF APPLICANT, ATTORNEY, O	AGENT				
Gordon & Rees, LLP [Customer No. 27111]) ,					
Signature Yarrollec	~200					
Printed name David R. Heckadon						
Date April 21, 2006	Re	No. 50,184				
CERTIFICATE OF TRANSMISSION/MAILING						
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.						
Signature Wanda	allere					
Typed or printed name Wanda Alleje		Date Apri	1 21, 2006			

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Complete If Known

PTO/SB/17 (01-06)
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			1 1 1	Application Number	10/789,	065	
FEE TR	KAN5	1VII I <i>I F</i>	Filing Date February 27, 2004			ary 27, 2004	
fo	r FY 20	006	7	First Named Inventor		A. Lipshaw	
			Ī	Examiner Name		Jo Doster G	reene
Applicant claims small	entity status.	See 37 CFR 1.27	7				
	,,		-	Art Unit	3743		
				5 1 1 1			<u> </u>
TOTAL AMOUNT OF P	AYMENT	(\$)180.00		Attorney Docket No.	CAID-101	9480 (formerly	110651-022)
METHOD OF PAYME	NT (check all	that apply)					
Check Credi	t Card	Money Order	None	Other (please	identify):		
Deposit Account	Deposit Account	Number: <u>50-19</u>	90	Deposit Accour	t Name: Gord	on & Rees, LLI	P
For the above-ide	ntified deposit	account, the Dire	ector is hereb	y authorized to: (che	ck all that apply	/)	,
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FEE CALCULATION	(All the fees	below are du	e upon filir	ng or may be sub	ect to a surc	harge.)	
1. BASIC FILING, SE							
,,	FILING I			H FEES	EXAMINA	TION FEES	
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM F	EES					<u>s</u>	mall Entity
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (in						50	25
Each independent clair	m over 3 (inc	luding Reissue	es)			200	100
Multiple dependent cla		-				360	180
Total Claims	Extra Cla	ims Fee	(\$) Fees	Paid (\$)		Multiple Depe	
- 20 or H		_ x	_ =			Fee (\$)	Fee Paid (\$)
HP = highest number of total	claims paid for, i	f greater than 20					
Indep. Claims	Extra Cla	ims Fee	(\$) E000	Paid (\$)			

Number of each additional 50 or fraction thereof Total Sheets Extra Sheets Fee Paid (\$) (round up to a whole number) - 100 = 4. OTHER FEE(S) Fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Submission of Information Disclosure Statement Und. 37CFR 1.17(p) 180.00

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50

HP = highest number of independent claims paid for, if greater than 3

sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

3. APPLICATION SIZE FEE

SUBMITTED BY Signature Registration No. 50,184 Telephone (415) 875-3266 Name (Print/Type) David R. Heckadon Date April 21, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office Any state and the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office Any state and the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office Any state and the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office Any state and the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office Any state and the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office Any state and the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office Any state and the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office Any state and the complete and the complete and the complete and the chief Information Office Any state and the complete and the complete and the chief Information Office Any state and the chief and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS YES PHISORIES.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

LIPSHAW, Moses A., et al.

Serial No.: 10/789,065

Filed: February 27, 2004

For: LIMB ENCIRCLING THERAPEUTIC

COMPRESSION DEVICE

Customer No.: 27111

Confirmation No.: 7359

Group Art Unit: 3743

Examiner: Doster Greene, Dinnatia Jo.

Docket No.: CAID-1019480

[formerly 110651-022]

I HEREBY CERTIFY THAT THIS PAPER IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE WITH SUFFICIENT POSTAGE AS FIRST CLASS MAIL IN AN ENVLELOPE ADDRESSED TO MAIL STOP AMENDMENT, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 ON APRIL 21, 2006.

Wands alleje

SECOND INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. § 1.97

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

04/27/2006 BABRAHA1 00000083 501990 10789065

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180.00 DA

Sir:

Pursuant to 37 C.F.R. §§ 1.56, 1.97 and 1.98, Applicants submit for consideration in the above-identified application the documents listed on the attached Form PTO/SB/08a and PTO/SB/08b with the exception of United States published applications and issued patents for consideration by the Examiner.

This Information Disclosure Statement is submitted:

	Within three months of the application filing date or before mailing of a first Office
Action on the	merits; accordingly, no fee or separate requirements are required.

After receipt of a first Office Action on the merits but before mailing of a final Office Action or Notice of Allowance.

Appl. No. 10/789,065 . Filed: February 27. 2004

Second Information Disclosure Statement

A fee is required. A check in the amount of * is enclosed.

A fee in the amount of \$180.00 is required. Please charge Deposit Account
No. 50-1990 in the amount of \$180.00. A duplicate copy of this paper is
included herewith.

A Certification under 37 C.F.R. § 1.97(e) is provided below; accordingly; no
fee is believed to be due.

After mailing of a final Office Action or Notice of Allowance, but before payment of
the issue fee. Accordingly, a Petition requesting consideration of the Information Disclosure

Statement, an authorization to charge our deposit account, and a Certification under 37 C.F.R. §
1.97(e) are provided herein.

In the unlikely event that the transmittal letter is separated from this document and the Patent Office determines that an extension and/or other relief is required, applicant petitions for any required relief including extensions of time to charge the cost of such petitions and/or other fees due in connection with the filing of this document to **Deposit Account No. 50-1990** referencing <u>CAID-1019480</u> and please credit any excess fees to such deposit account. However, the Commissioner for Patents is not authorized to charge the cost of the issue fee to the Deposit Account.

Respectfully submitted,

Dated: April 21, 2006

David R. Heckadon Registration No. 50,184

Please recognize our Customer Number 27111 as our correspondence address.

GORDON & REES, LLP 101 West Broadway, Suite 1600 San Diego, California 92101-8217

Phone: (415) 865-3266 Facsimile: (415) 986-8054

Attorney Docket No. CAID-1019480

PTO/SB/08a (07-05)

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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Complete if Known Application Number 10/789.065 Filing Date February 27, 2004 First Named Inventor Moses A. Lipshaw Art Unit 3743 **Examiner Name** Dinnatia Jo Doster Greene CAID-1019480 (formerly 110651-022)

(Use as many sheets as necessary)

Attorney Docket Number Sheet

U. S. PATENT DOCUMENTS Name of Patentee or Examiner Cite **Document Number Publication Date** Pages, Columns, Lines, Where Initials* MM-DD-YYYY Applicant of Cited Document Relevant Passages or Relevant Number-Kind Code^{2 (if known)} Figures Appear us- 5,904,145 Reid 05/18/1999 us- 5,916,183 06/29/1999 Reid us-6,196,231 03/06/2001 Reid us- 6,656,141 12/02/2003 Reid US- 2004/0111047 06/10/2004 Reid US-US-US-US-US-US-US-US-US-US-US-US-

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No.1	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document		T ⁵
	<u> </u>	Country Code ³ "Number ⁴ "Kind Code ⁵ (if known)			or Relevant Figures Appear	<u> </u>
	+					
<u> </u>	 					

Examiner Signature	Date Considered	

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

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